

EMERGENCY MEDICAL SERVICES ADVISORY COUNCIL  
MARCH 13, 2002

**Members/Alternates Present:** Ms. Barbara Aras, Ms. Marlene Atkins, Dr. John Brennan, Mr. Lawrence Cattano, Mr. Jesus Cepero, Ms. Terry Clancy, Mr. Robert Clawson, Mr. Ron Czajkowski, Ms. Karen Halupke, Mr. Martin Hogan, Ms. Thelma Jennis, Dr. David Livingston, Ms. Debbie Murante, Dr. James Pruden, Mr. Craig Reiner, Mr. Robert Resetar, Mr. Fred Steinkopf, Ms. Deborah Timpson, Mr. John Tweed, Ms. Sue VanOrden, Ms. Susan Way, Mr. Phil Wien

**Members/Alternates Absent:** Mr. Robert Hansson, Dr. Ernest Leva, Senator Palaia

**OEMS Staff Present:** Ms. Bonnie Anderson, Mr. William Dougan, Mr. William Duffy, Ms. Nancy Kelly-Goodstein, Ms. Linda Taglairino

Dr. Pruden called the meeting to order at 10:10 a.m.

Minutes from December 12, 2001 meeting were approved.

**BASIC LIFE SUPPORT COMMITTEE**

Mr. Fred Steinkopf reported that no BLS committee meeting took place. He plans to have a meeting in April. Anyone interested in serving on this subcommittee should email Mr. Steinkopf at [fls@njsfac.org](mailto:fls@njsfac.org).

Motion to accept. Seconded. All in favor.

**By-Laws**

No report.

## **EMS COMMUNICATIONS COMMITTEE**

Mr. Robert Resetar reported the Communications Committee met on March 6, 2002. The following was discussed:

- A standardized definition of hospital patient bed status count process and forms has been published. It was agreed that the EMS/ALS Communications Centers would be responsible for compiling and disseminating the information once gathered to the State EOC and County EOCs as requested.
- Radios have been distributed by NJ State Police to the 10 New Jersey Trauma Centers. Installation is the Trauma Center's responsibility. As of March 6, 2002, Cooper, Hackensack, Helene Fuld, Robert Wood Johnson University Hospital, and UMDNJ University Hospital were active. No decision has been made as to when radio checks will occur. Currently, they are checks at random.
- Questions were raised by Helene Fuld about adding the NJ MICU Channel to their "trauma" radio since they can not afford to purchase one now. It was agreed that the Talk group could be added on an interim basis until they can work out the financial logistics. The group felt that separate radios is the most appropriate way to operate.
- NJ Guide Cards remain under review. Changes are anticipated in several areas. Card design for AED and others underway.
- Emergency Support Function (ESF) #8 Health and Medical Annex of the NJ State Emergency Operations Plan has been completed. NJSP, OEM and NJDHSS will review these updates prior to dissemination.
- National Emergency Number Association NJ Chapter is holding the annual Spring Conference April 15 & 16 in the Hanover Marriott Whippany.

Motion to accept. Seconded.

Discussion:

The MEDPREP group is considering a recommendation to expand the use of the 800MHz radios to all NJ hospitals. This would be a significant burden on the radio system. A suggested solution to this problem is to use the NJSP model of three regions.

Motion to accept is approved.

## **EMT TRAINING FUND**

Ms. Debbie Murante stated that the EMT Training Fund committee is scheduled to meet next week. As a review, she stated that good ideas have been raised and approved by the Council for the use of training fund monies. However, under the current law, they cannot be implemented. The Council is working with NJSFAC to examine and change the law to meet the needs of the volunteer EMS community.

Mr. Steinkopf stated that the NJSFAC will be coming out with legislative changes, which will allow for appropriate and approved initiatives to move forward.

Motion to accept. Seconded. All in favor.

### **MICU ADVISORY COUNCIL**

Dr. James Pruden reported the MICU Advisory committee met on March 11, 2002.

Pediatric standing orders were reviewed and approved with minor revisions.

One hospital conducted a study on the use of thrombolitics over four years, with 24 cases. The results showed that there were no significant problems and only one person died. It was suggested that thrombolitics be available as an optional drug.

The update on HCFA rule will be discussed later in the meeting.

Motion to accept. Seconded. All in favor.

### **NJPIES**

Ms. Thelma Jennis reported NJPIES has relocated to UMDNJ in Newark on January 1, 2002. There is a big push for a nationwide 800 number. The number is 1-800-222-1222. There is a big push for education. NJPIES will be making a major distribution of stickers, with the aim of having a sticker sporting the new number on every phone. The stickers will be available in English and Spanish. The old 800 number will remain active, in order to assure that a call is not missed.

Motion to accept. Seconded. All in favor.

### **NJOEM**

The Office of Emergency Management (OEM) is currently dealing with budget issues. Some of the training activities of Task Force One were curtailed due to funding issues.

OEM continues the planning of upcoming disaster scenarios.

Governor McGreevey has declared April as anti-bioterrorism month.

### **NJSFAC**

The NJSFAC's prime concern is the National Registry (NR) examination. The failure rate is 50%. Mr. Steinkopf stated that he does not believe that the students are the problem.

Mr. Steinkopf expressed concern over the fact that the students who fail the exam receive solicitations for a \$15 study guide. This concerns him as it relates to privacy issues.

Mr. Steinkopf stated concern over training sites canceling basic courses, as a result of the lack of students enrolled. Agencies are offering EMTs \$14/hour because there is a shortage. He feels that NJ cannot afford to have people take the test and fail.

The NJSFAC has requested a meeting with Commissioner Lacy regarding this as a real concern. Rolling out initiatives on protocol crossovers from First Responder to EMT are also priorities of the NJSFAC, which they hope to discuss with Commissioner Lacy. NJ does not want to be in a situation where no one is there to receive “the call.” Mr. Steinkopf stated there are many alternative training options that should be investigated and while work continues with the State Office on these options, that legislative solutions would be pursued if necessary.

Motion to accept. Seconded.

Discussion:

Dr. Pruden stated that training standards need to be uniformly applied. The instructors need to be thoroughly knowledgeable on the curriculum and train to the curriculum. He expressed his support of the use of the National Registry and the need to help our EMT students to be properly trained so that they will be successful. This will take effort all around, by the medical directors, the State, the instructors and the students.

Mr. Steinkopf stated that he believed that the National Registry test is like studying for an algebra test and then being given a geometry test. People are geared to standard curriculum. NJ’s regulations are different than the National curriculum. The National Registry also prides itself in giving a tougher test. He also believes that with the cost of a basic course going to \$550, the study guide should be included.

Mr. Steinkopf expressed concern that a group of students that were taught under the old curriculum in 2001 were given the new test. Mr. Clawson explained that the curriculum has not changed since 1994.

Ms. Clancy stated if training sites follow curriculum, the students will pass. If instructors don’t follow curriculum the students won’t pass because instructors are not giving them the tools and information they need. Instructors must teach to the curriculum and not teach to the old test.

Ms. VanOrden stated that there is an issue that these students are testing for National Registry certification, which is only for a two-year period. NJ allows for three years to recertify.

Mr. Clawson explained that it is optional if an EMT wants to remain Nationally Registered. If they choose not to maintain national certification they can choose to use the three-year certification period offered by NJ and maintain a NJ certification only.

Mr. Wien stated that some people can be EMTs and some cannot. This testing is a way to screen which ones cannot.

Dr. Pruden suggested that we revisit the issue in June and see what progress has been made.

Mr. Steinkopf introduced the NJSFAC's new officers: Barbara Aras – Central area, Phil Wein – Southern area, and Sue VanOrden – Northern area.

Motion to accept is approved.

## **EMSC**

Ms. Nancy Kelly-Goodstein stated the next EMS for Children Advisory Council meeting will be March 19, 2002. The meeting location has been changed to the NJ Hospital Association.

The EMSC Conference will be May 5 & 6 in Mt. Laurel. Registration has been good, thus far.

Ms. Kelly-Goodstein announced that she received notice regarding the EMSC partnership grant. The grant was approved for \$100,000. Unfortunately, the Targeted Issue Grant, which was to be used for the development of a pediatric critical care registry, was denied.

The National Grantee meeting and conference will be held in Dallas, Texas in April.

Ms. Kelly-Goodstein continues to participate in Department of Education (DOE) meetings as it relates to EMSC. She reported that the DOE plans a major overhaul of the curriculum of grades K-12. DOE intends to propose regulations requiring that First Aid, CPR, Injury Prevention and AED training will be taught by the time of graduation. DOE is asking for groups in favor of this proposal to write letters of support

Motion to accept. Seconded.

Discussion:

Location and dates of the DOE focus groups on the curriculum are:

Stockton State College      March 13, 2002

Rutgers University      March 19, 2002

County College of Morris      March 21, 2002

Information can be obtained from the Department of Ed website or by calling 888-694-9900.

Ms. Jennis stated the poison center conducts an elementary school program. There are 667 school districts. Department of Education will be looking for partners.

Motion to accept report approved.

A motion was made for the EMS Council to write letter of support to offer any assistance. Seconded. All in favor.

## **LEGISLATIVE**

Mr. Marty Hogan introduced Sue Caputo to brief the Council on pending legislation. Ms. Caputo stated all legislation died after the first week of January. She distributed a detailed list of all new legislation introduced. Mr. Howard Meyer reported on S.1227, an act creating the Fire Service Resource Emergency Deployment Act. This bill will give two people at state level the authority to take command. He believes it will undermine the incident command system.

Motion to accept. Seconded

Discussion:

Discussion ensued on the bill and Mr. Meyer asked that individuals take action to stop this bill from progressing. The Senate Judiciary Committee is scheduled to meet on this tomorrow.

Motion to accept is approved.

## **TRAUMA CENTER**

Dr. Livingston reported that radios had been issued to all Trauma Centers.

Trauma systems report distributed by OEMS was reviewed by the Trauma Center Council. Dr. Livingston confirmed that the trauma physicians feel it is a good report but question what will be done to implement the report's recommendations.

Trauma center directors have been involved in Governor McGreevey's MEDPREP group. The group is focused heavily on bioterrorism issues. Dr. Livingston stated that he feels that more conventional attacks are more likely to happen, but he realizes that bioterrorism is where there is funding now.

Dr. Livingston reported that there has been no movement on trauma registry.

Some trauma centers have been revisited by the American College of Surgeons (ACS) for reverification. More are slated in the near future. Dr. Livingston agreed that all trauma centers should be reverified.

There continues to be a trauma systems threat from insurance companies. Retroactive denials of claims from insurance companies puts a financial strain on the trauma centers.

Dr. Livingston reported that the Trauma Council is opposed to Raped Sequence Intubation (RSI) in the field for trauma patients. He cited the small percentage of patients that would benefit from this procedure and the high success rate of intubation as reasons. He rejected the argument that if flight crew medics can do it ground medics should be able to, stating that flight crew medics have more training and more recurrency training.

Motion to accept. Seconded. All in favor.

## **OPERATIONS**

No report.

## **PROFESSIONAL EDUCATION**

Mr. Clawson reported that the Instructor Training Institute screening process finished this past Sunday. Forty instructor candidates were identified. Those candidates must now complete 90 hours of monitored teaching time.

National Registry exam has been instituted. As expected, we are encountering some problems. One thing to keep in mind is that the results are preliminary, with 538 tested there is a 49% pass rate. However, OEMS feels the low pass rate should be tackled immediately. On March 4, 2002 there was a meeting with National Registry to orient the physician group with the test. The group decided that the test is a good tool and favored continuation. They felt the problem is with training sites. Instructors are not teaching toward the national standard objectives. Current instructors should take and pass an exam. This should be mandatory. There needs to be more inservice sessions for instructors.

Motion to accept. Seconded.

Discussion:

Ms. Timpson asked if there was a structured plan for the instructor inservice sessions. Mr. Clawson reported that Mr. Dinetz had begun work on the framework and that upon his return from vacation, he will complete this and shortly thereafter begin to meet with the various training sites.

Mr. Steinkopf stated that he believed the high failure rate will result in a cut in the number of instructors which will then make the course less available and increase the shortage of EMTs. He supports a bell curve for scoring, which is possible if only a NJ certification is issued.

Dr. Pruden stated it will take time and several initiatives to make this work. The National Registry will be back to meet with other groups on the test and to assist in making NJ successful with the test.

Ms. Van Orden stated the need to focus on the ITI and to require instructors to attend ITI.

There was discussion on the topic of a bridging program for first responders. All squads need to look at this. Just because they are a volunteer EMT doesn't mean you have to keep them. Need to get instructors onboard before training the EMTs.

Mr. Steinkopf complimented Mr. Clawson on his responsiveness to the public and their concerns.

Motion to accept is approved by all.

## **PUBLIC EDUCATION**

Ms. Kelly-Goodstein distributed a draft version of the EMS informational brochure. She requested members to review it and to give her feedback.

The subject of 911 calls and cell phones was raised. The problem with cell phones is that when people call and hang up, there is no way of tracking the call. This could be a topic for public education.

Motion to accept. Seconded. Report accepted.

## **SYSTEM FINANCE**

Final rules from CMS on the ambulance fee schedule were published February 27, 2002. The rules take effect on April 1, 2002.

The first read of the rules show a slight increase in BLS ambulance, but the cost of service is still approximately \$70 more than reimbursement.

There will be a five-year implementation schedule as follows:

- Year 1 – 80% old, 20% new
- Year 2 – 60% old, 40% new
- Year 3 – 40% old, 60% new
- Year 4 – 20% old, 80% new
- Year 5 - 100% new

There are some changes from the original proposal that will allow for ALS and BLS respond to some calls.

It also requires a contractual agreement between BLS provider and MICU. It is not clear how this will be monitored.



Motion to accept. Seconded.

Discussion:

Mr. Tweed stated MTANJ already losing \$75 on a call. With the new regs, they would only lose \$50.

Ms Van Orden stated there could be a \$750,000 ALS loss per program per year.

Mr. Hogan stated that he believed the end result will be inadequate reimbursement for both ALS & BLS, which underscores the need to stay focused and work together.

Mr. Hogan looking to get money in rural areas. He stated that we are already saving \$40-million, with the way the system is designed in NJ.

Mr. Steinkopf stated to make sure hospitals are doing all they can to support the volunteer system. HCFA has a pot of money for ambulance fee schedule. Need to reduce reimbursement because they only have a certain amount in the pot.

Motion to accept approved.

## **OEMS**

Ms. Way announced that the Department has a new Commissioner, Dr. Clifton Lacy, and a new Chief of Staff, Mary Wachter, RN.

Many areas of the Department, including OEMS have been working on the grant applications for bioterrorism. There is approximately \$4-million from HRSA for hospital preparedness and approximately \$23-million from the CDC for public health response and infrastructure.

The 2002 EMS Awards dinner is May 20, 2002, at the Radisson in Mount Laurel. The deadline for nominations has been extended to March 30<sup>th</sup>. Ms. Way encouraged people to make nominations, as only a few have been received thus far.

Ms. Way reported that OEMS has some serious staffing concerns. There are currently two vacancies frozen, (these positions were held by Jon Lord and Jim Mondoro). In February, Darcy Saunders, the OEMS attorney, was laid-off and that position is now frozen.

The proposed regulations were completed prior to Ms. Saunders leaving. The proposals went to the legal unit in the first week of January and are still there.

Ms. Way reminded everyone that the EMS for Children conference is May 4 & 5.

Motion to accept. Seconded.

Discussion:

Dr. Pruden also encouraged people to submit nominations for EMS awards.

Motion to accept approved by all.

## **NEW BUSINESS**

Five members were nominated for the Council Executive Committee.

Dr. Pruden

Mr. Hogan

Dr. Waxler

Mr. McCabe

Mr. Steinkopf

Nominations accepted and closed.

All in favor.

Ms. Aras expressed concern that there was no representation from the Senate or Assembly.

## **PUBLIC COMMENT**

Mr. Meyer asked OEMS to send alternates the attachments to the minutes and for an updated list of members and their email addresses.

Mr. Meyer also commented that the National Registry does not have EMT instructor hour-for-hour equivalent to recertify.

Ms. Ferrara asked that copies of letters of support sent by the Council be included to members of the board. She also commented on the Department of Education proposed changes to the core curriculum. They will have an immediate impact on health and physical education.

Ms. Ferrara expressed her frustration in trying to get a bill passed. She stated that the NJSFAC tried five times to get a bill passed and the DHSS asked for input. She stated that she believed the DHSS was undermining their efforts.

Mr. Quintano, of Citizens for Better EMS, stated that he observes that the volunteers are not responding and that the HCFA fees schedule is the best thing that could have happened.

Dr. Pruden adjourned the meeting. The next meeting is June 12. The September meeting will be on the 18<sup>th</sup>. Thanks were extended to the Allentown First Aid Squad for hosting the meeting.